

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO | DATE |
|---------------------------|----------|-------|---------|
| FEE DETERMINATION | (KAD) | | 04-13-8 |
| O.I.P.E. CLASSIFIER | (M) | 35 | 5/15 |
| FORMALITY REVIEW | (M) | 20864 | 6/11/0 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N
 = Allowed I
 (Through numeral) Canceled A
 Restricted O
 Non-elected
 Interference
 Appeal
 Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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